Received in BO

MEMORANDUM OF AGREEMENT

SEP 2 6 2012

Between the

PO Attached _____ Packing Slip

Vermont Department of Health, Division of Alcohol and Drug Abuse Programs
And
Department of Vermont Health Access

July 1, 2012 - June 30, 2013

I. Purpose

The Vermont Department of Health will transfer to the Department of Vermont Health Access (DVHA), Blueprint Unit, \$165,000.00 from the Vermont Department of Health (VDH), Division of Alcohol and Drug Abuse Programs (ADAP) for the purpose of supporting the capacity of advanced primary care practices and community health teams to better serve individuals with substance use and co-occurring disorders.

II. Terms of Agreement

The terms of this agreement are that ADAP and the DVHA Blueprint will invest these funds in activities designed to improve the provision of substance abuse and co-occurring treatment services in Blueprint advanced primary care practices and community health teams statewide. These funds will also be used to support workforce development, training, and technical assistance to support the Hub and Spoke initiative. Other options for statewide practice improvement include training for Community Health Teams on Screening, Brief Intervention, and Referral to Treatment (SBIRT) protocols; consultation and technical assistance to primary care practices on addiction treatment including for patients with opiate dependence; and in developing the skills and knowledge of the Blueprint practice facilitators to support substance abuse treatment in primary care.

III. Deliverables and Timeline

The DVHA Blueprint will provide ADAP with a final report summarizing the activities undertaken from July 1, 2012 – June 30, 2013.

ADAP and the DVHA Blueprint team will meet monthly to develop a formal plan for the use of these funds.

IV. Funding Source

This funding will be provided by ADAP for one year only, for the period of July 1, 2012 – June 30, 2013. If additional funding for future years is not forthcoming, DVHA is under no obligation to continue the additional funding to the sub-grantees or any statewide initiatives that are undertaken with these funds.

V. Payment Provisions

The DVHA business office will invoice VDH/ADAP Business Office for the full amount of this agreement upon final execution of this MOU. Based on the invoice, the VDH/ADAP business office will initiate an interdepartmental transfer to DVHA and notification of the transfer will be sent via email to Kate Jones in the DVHA business office. Kate.jones@ahs.state.vt.us.

By signing this agreement all parties agreed upon all the terms as stated above.

Agree upon by:

Barbara Cimaglio, Deputy Commissioner Vermont Department of Health

Date

Mark Larson, Commissioner

Vermont Department of Health Access



Vermont Department of Health 108 Cherry Street, P.O. Box 70 Burlington, VT 05402-0070 www.healthvermont.gov

[phone] 802-863-7200 [fax] 802-865-7754 Agency of Human Services

Dear Contractor:

Enclosed is your contract which requires your signature. Please return the entire, signed, original contract to:

Angela Foster
Vermont Department of Health
Business Office
108 Cherry St.
P.O. Box 70
Burlington, VT 05402-0070

Once fully executed, we will mail you a final copy for your records.

Thank you,

Angela Foster Administrative Services Tech. 802-657-4286

Angela.Foster@state.vt.us

